# MULTIPLE DEPENDENT CLAIM
# FEE CALCULATION SHEET

| Application Number | Filing Date |
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| 09/856 795 | |

| | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Indep | | | | | | |
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| Total Claims | | | | | | |

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

**Application Number** 09/856.728

**Filing Date**

| Claim | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Indep | 3 | | | | | |
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| Total Claims | 50 | | | | | |

| Claim | Indep | Depend | Indep | Depend | Indep | Depend |
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